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APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.	
09/231,791	01/15/1999	GIUSEPPE GUARINO	Q-52856	2603	
SUGHRUE,MION,ZINN,MACPEAK & SEAS 2100 PENNSYI,VANIA AVENUE			EXAM	EXAMINER	
			LEUNG, JENNIFER A		
WASHINGTON, DC 200373202		ART UNIT	PAPER NUMBER		
			1797		
			MAIL DATE	DELIVERY MODE	
			06/04/2008	PAPER	

Please find below and/or attached an Office communication concerning this application or proceeding.

The time period for reply, if any, is set in the attached communication.



UNITED STATES PATENT AND TRADEMARK OFFICE

Board of Patent Appeals and Interferences

SUGHRUE, MION, ZINN, MACPEAK & SEAS 2100 PENNSYLVANIA AVENUE WASHINGTON, DC 20037-3202

Appeal No: 2008-0412

Appellant: GIUSEPPE GUARINO et al. 09/231.791

Application No: Hearing Room:

> Hearing Docket: Α Hearing Date: Tuesday, July 08, 2008

Hearing Time: 09:00 AM Location:

Madison Building - East Wing 600 Dulany Street, 9th Floor Alexandria, Virginia 22313-1450

NOTICE OF HEARING CONFIRMATION REQUIRED WITHIN TWENTY-ONE DAYS

Your attention is directed to 37 CFR § 41.47. The above identified appeal will be heard by the Board of Patent Appeals and Interferences on the date indicated. Hearings will commence at the time set and as soon as the argument in one appeal is concluded, the succeeding appeal will be taken up. The time allowed for argument is twenty minutes unless additional time is requested and permitted before the argument is commenced. If there are any inquires, please contact the Clerk of the Board at 571-272-9797.

CONFIRMATION OR WAIVER OF THE HEARING IS REQUIRED. This form must be completed below and facsimile transmitted to both: (1) the USPTO Central fax number (official copy), and (2) the Board of Patent Appeals and Interferences fax number (courtesy copy) within TWENTY-ONE (21) DAYS from the mailing date of this notice indicating confirmation or waiver of the hearing. A copy of this notice may be alternately filed by mail if facsimile is not available.

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In all communications relating to this appeal, please identify the appeal by its number.

CHECK ONE: () HEARING ATTENDANCE CONFIRMED () HEARING ATTENDANCE WAIVED

Registration No. Signature of Attorney/Agent/Appellant Date

Names of other visitors expected to accompany counsel:

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